## **UNITED STATES**

## 1946

## NONRESIDENT ALIEN INCOME TAX RETURN

	For a Nonresident Alien (Other Than a Resident of Canada or of the United Kingdom) Not Engaged in Trade or Business Within the United States Whose Gross Income From Sources Within the United States Was More Than \$15,400.  For Calendar Year 1946	(Do not use these spaces) File Code				
	or fiscal year beginning, 1946, and ending, 1947	Serial No.				
	To be filed with the Collector of Internal Revenue, Baltimore 2, Maryland, not later than the 15th day of the 6th month following the close of your taxable year					
	PRINT NAME AND ADDRESS PLAINLY	(Cashier's Stamp)				
	(Name)					
	(Street and number, or rural route)	Cash—Check—M. O. First Payment				
	(City or town) (Country)	\$				
	GROSS INCOME					
	Salaries, wages, bonuses, commissions, etc. (State name and address of employer):					
1.	Dalaries, Wages, Donuses, Commissions, etc. (State name and address of employer):	5	<b>.</b>			
2.	Dividends. (From Schedule A)	- 1		1		
	Interest on notes, mortgages, corporation bonds, etc.					
	Interest on Government obligations, etc., unless wholly exempt from tax					
	Income from fiduciaries. (Furnish names and addresses):					
6.	Rents and royalties					
	Other income (including income from annuities). (State nature; use separate schedule if necessary)			_		
8.	_ , i,					
	DEDUCTIONS	=		= ==		
9.	Contributions. (Explain in Schedule C)	\$	B			
10.	Interest. (Explain in Schedule C)					
11.	Taxes. (Explain in Schedule C)					
12.	Depreciation (from Schedule B) and depletion. (Submit Schedule)					
13.	Other deductions authorized by law. (Explain in Schedule C)					
14.						
15.	Net income from sources within United States (item 8 less item 14)	\$	ß			
	COMPUTATION OF TAX					
16	Net income (item 15, above)	\$	B			
	Less: Exemptions (\$500 if not a resident of Mexico; if a resident of Mexico, see Schedule D ar	nd				
10	Instruction 17)			_		
18.	Balance (item 16 less item 17)	4	)	_ _		
19.	Combined tentative normal tax and surtax on amount in item 18. (Use tax rates in Instruction 19	٠) ا	•			
20	(If item 4 above includes partially tax-exempt interest, see Instruction 19.)		)			
20.	Less: 5 percent of item 19	a	<u> </u>	_		
21.	Combined normal tax and surtax (item 19 less item 20)	4	?	_		
22.	Total Income Tax (item 21, or 30 percent of item 8, whichever is larger)	4	/ <del></del>			
23.	Less: United States income tax paid at the source	-	<u> </u>	-		
24.	Balance of Income Tax	4	P	1		

		Sch	edule A	A.—II	NCOME	FRO	M	DIVIDEN	DS	(See Instruction 2)					
Name and	ion	Date Received		Amount		Name and Address of Payor Corporation					Date Received	_	Amount		
				\$									- \$		-
							-						-		
Total.	(Enter as item 2,	1					-11				· <b></b>		\$		
	Schedule B.—I										MED I	N ITE	M 12		
			3. Cost	or Othe	r			5 D :			7. Estin	nated 8. E	 Stimated		
(If Building	d of Property s, State Material of Constructed)	2. Date Acquired	te Basi		nd Deprecia ci- at End	4. Assets Full Depreciated in V at End of Yea		ly 5. Deprecia Allowed (a allowable) Prior Yea		6. Remaining Cost or Other Basis To Be Recovered	Life U in Accu latin Depreci	Ised Re imu-Lif ig Be	maining fe From ginning f Year		
			\$		\$			\$		\$				. \$	
	Schedule C.	—EXPL	ANAT	ION	OF DED	UCT	IOI	NS CLAIN	ИED	IN ITEMS 9,	10, 11	, AND	13		
1. Item No.	2. Ex	planation			3. Amount			1. Item No.		2. Explanation				3. Amo	unt
					\$									\$	<u> </u>
					· 		-								-
						-	-		<b>-</b> -						
							_								
	Schedule D.—E	XEMPT	TIONS	CLAI	IMED B	Y RE	ESII	DENT OF	ME	XICO IN ITE	M 17	(See Instr	ruction 17	7)	
closely related United States v	tes during the year a to the taxpayer wh was less than \$500. 's own name	o received	more t	han or 	ne-half of	their	supp	port from th	e tax	payer and whose	gross	income	from so	ources with	in the
,	, 														
4	(Name)									(Relatio					
5							(Relationship)  (Relationship)								
If more sp	(Name) ace is needed, attach	list. En	iter in it	em 17,	\$500 for e	ach p	erso	n listed in t	his scl		misimp)				
					Q	UES	5 <b>T</b> ]	IONS							
1. Of what country are you a resident?															
2. State you	r occupation or p	rofession	. ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ		. <b></b>					If					
3. Did you file a return for any prior year? To which col					llector's o	office	e why it was excluded.								
was it s	sent?														
I declar examined by	e, under the pena me and to the bo	lities of g	perjury y know	, tha ledge	t this ret and beli	urn ( ef is	(inc	cluding an rue, correc	y acc t, an	companying scl d complete ret	nedule urn.	s and s	tatem	ents) has	; beer
(Signature of pe	rson (other than taxpayer o	r agent) prep	paring retu	rn)	(Date	)				(Signature of Taxp				(Dat	te)
(I	Name of firm or employer,	if any)								(Signature of Ago				(Dai	te)

A return made by an agent must be accompanied by power of attorney. (See Instruction F.)